Please amend the subject application as follows:

IN THE CLAIMS:

In compliance with the practice guidelines for making amendments under 37 C.F.R. §1.121(c)(1), Applicants present all pending claims with status indicators. Please cancel claims 7-8, 14-16, 18-23, 27 and 38-43, without prejudice to pursue the subject matter of these claims in the subject application at a later time upon indication of an allowable generic claim.

Please amend (a) claims 1, 6, 9, 13, 24, 28-34 and 37 and (b) withdrawn claims 11, 25-26, 28-29, 51 and 53 and add new claims 44-56 as follows:

1. (Currently amended) A method of inhibiting rejection of a solid organ or tissue/cellular transplant in a subject having a transplanted tissue comprising:
   a) administering an alkylating agent to the subject; and
   b) subsequently administering T cell depleted bone marrow cells to the subject ~~at approximately the same time~~ before, during or after ~~as~~ the solid organ or tissue/cellular transplant,
   thereby inhibiting rejection of the solid organ or tissue/cellular transplant.

2. (Original) The method of claim 1, wherein the alkylating agent is busulfan.

3. (Original) The method of claim 1 further comprising the step of administering to the subject an immunosuppressive composition that blocks T cell costimulatory signals in the subject.

4. (Original) The method of claim 3, wherein the immunosuppressive composition comprises a combination of a first ligand that interferes with binding of CD28 to either CD80 or CD86, and a second ligand that interferes with binding of CD154 to CD40.

5. (Original) The method of claim 4, wherein the first ligand is a soluble CTLA4 molecule.

6. (Currently amended) The method of claim 4, wherein the first ligand is a ~~CTLA4-Ig~~ CTLA4Ig.

7-8. (Cancel)

9. (Currently amended) A method for establishing mixed hematopoietic chimerism in a subject ~~having a transplanted tissue~~ so as to inhibit or reduce rejection of a solid organ or tissue/cellular transplant, comprising:

a) administering T cell depleted bone marrow cells to the subject;

b) administering an alkylating agent to the subject; and

c) administering an immunosuppressive composition that blocks T cell costimulatory signals in the subject,

thereby establishing hematopoietic chimerism in the subject so as to inhibit or reduce rejection of the solid organ or tissue/cellular transplant.

10. (Original) The method of claim 9, wherein the alkylating agent is busulfan.

11. (Withdrawn) The method of claim 9, wherein the immunosuppressive composition comprises a combination of a first ligand that interferes with binding of CD28 to either CD80 or CD86, and a second ligand that interferes with binding of CD154 to CD40.

12. (Original) The method of claim 11, wherein the first ligand is a soluble CTLA4 molecule.

13. (Currently amended) The method of claim 11, wherein the first ligand is a ~~CTLA4-Ig~~ CTLA4Ig.

14-16. (Cancel)

17. (Original) The method of claim 9, wherein the T cell depleted bone marrow is administered in at least two doses.

18-23. (Cancel)

24. (Currently amended) A method for treating hemoglobinopathy in a subject by establishing hematopoietic chimerism by the method of claim 9~~, or 18~~.

25. (Withdrawn) The method of claim 24, wherein hemoglobinopathy is beta-thalassemia.

26. (Withdrawn) The method of claim 24, wherein the hemoglobinopathy is sickle cell disease.

27. (Cancel)

28. (Withdrawn and currently amended) The method of claim 9 ~~or 18~~, wherein steps (b) and (c) are concurrent.

29. (Withdrawn and currently amended) The method of claim 9 ~~or 18~~, wherein steps (b) and (c) are subsequent to step (a).

30. (Currently amended) The method of claim ~~2, 10 or 18~~ 2 or 10, wherein the busulfan is ~~admitnistered~~ administered within one day prior to the solid organ or tissue/cellular transplant.

31. (Currently amended) The method of claim ~~2, 10 or 18~~ 2 or 10, wherein the busulfan is administered within twelve hours prior to the solid organ or tissue/cellular transplant.

32. (Currently amended) The method of claim ~~2, 10 or 18~~ 2 or 10, wherein the busulfan is administered within six hours prior to the solid organ or tissue/cellular transplant.

33. (Currently amended) The method of claim ~~1, 9, or 18,~~ 1 or 9, wherein the transplanted tissue is a skin graft.

34. (Currently amended) A method of reducing rejection of ~~an~~ a solid organ or tissue/cellular transplant in a subject in need thereof comprising:

a) administering a first dose of T cell depleted bone marrow cells and an immunosuppressive composition to a subject;

b) placement of an organ or tissue/cellular transplant to the subject;

c) administering busulfan to the subject; and

d) administering a second dose of T cell depleted bone marrow cells and an immunosuppressive agent,

thereby reducing rejection of the solid organ or tissue/cellular transplant.

35. (Original) The method of claim 34, wherein the immunosuppressive agent is a combination of a first ligand that interferes with binding of CD28 to either CD80 or CD86, and a second ligand that interferes with binding of CD154 to CD40.

36. (Original) The method of claim 35, wherein the first ligand is a soluble CTLA4 molecule.

37. (Currently amended) The method of claim 35, wherein the first ligand is a ~~CTLA4-Ig~~ CTLA4Ig.

38-43. (Cancel)

44. (New) The method of claim 5, 12, or 36, wherein the soluble CTLA4 molecule comprises an extracellular domain of CTLA4 which binds a B7 antigen.

45. (New) The method of claim 44, wherein the extracellular domain of CTLA4 has an amino acid sequence which begins with methionine at position 27 and ends with aspartic acid at position 150 as shown in SEQ ID NO:14, or which begins with alanine at position 26 and ends with aspartic acid at position 150 as shown in SEQ ID NO:14.

46. (New) The method of claim 6, wherein the CTLA4Ig comprises an amino acid sequence which begins with methionine at position 27 and ends with lysine at position 383 as shown in SEQ ID NO:14, or which begins with alanine at position 26 and ends with lysine at position 383 as shown in SEQ ID NO:14.

47. (New) The method of claim 5, 12, or 36, wherein the soluble CTLA4 molecule is a soluble CTLA4 mutant molecule.

48. (New) The method of claim 46, wherein the soluble CTLA4 mutant molecule comprises a mutated extracellular domain of CTLA4 which binds a B7 antigen.

49. (New) The method of claim 48, wherein the mutated extracellular domain of CTLA4 has an amino acid sequence which begins with methionine at position 27 and ends with aspartic acid at position 150 as shown in SEQ ID NO:4, or which begins with alanine at position 26 and ends with aspartic acid at position 150 as shown in SEQ ID NO:4.

50. (New) The method of claim 47, wherein the soluble CTLA4 mutant molecule is L104EA29Ylg comprising an amino acid sequence which begins with methionine at position

27 and ends with lysine at position 383 as shown in SEQ ID NO:4, or which begins with alanine at position 26 and ends with lysine at position 383 as shown in SEQ ID NO:4.

51. (New and withdrawn) The method of claim 4, 11 or 35, wherein the second ligand is a ligand for CD40.

52. (New) The method of claim 44, wherein the ligand for CD40 is an anti-CD40 antibody.

53. (New and withdrawn) The method of claim 44, wherein the ligand for CD40 is a soluble CD154 molecule.

54. (New) The method of claim 4, 11 or 35, wherein the first ligand is a soluble CTLA4 molecule and the second ligand is an anti-CD40 Ab.

55. (New) A method of inhibiting rejection of a solid organ or tissue/cellular transplant in a subject having a transplanted tissue comprising
a) administering T cell depleted bone marrow cells;
b) administering busulfan to the subject; and
c) administering CTLA4Ig and an anti-CD40 antibody to the subject,
thereby inhibiting rejection of the solid organ or tissue/cellular transplant.

56. (New) A method of inhibiting rejection of a solid organ or tissue/cellular transplant in a subject having a transplanted tissue comprising
a) administering T cell depleted bone marrow cells;
b) administering busulfan to the subject; and
c) administering L104EA29YIg and an anti-CD40 antibody to the subject,
thereby inhibiting rejection of the solid organ or tissue/cellular transplant.